

AGING COMMITTEE

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Public Hearing

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Written testimony of State Ombudsman, Nancy Shaffer

Good morning Senator Flexer, Representative Serra, Co-Chairpersons Senator Osten and Representative Rovero and esteemed members of the Aging Committee. My name is Nancy Shaffer and I am the Connecticut State Long-Term Care Ombudsman. Per the Older American's Act and CT General Statute 17b-400-417, it is the duty of the State Ombudsman to provide services to protect the health, safety, welfare and rights of the residents of skilled nursing facilities, residential care homes and managed residential communities/assisted living facilities. Most recently, the CT General Assembly mandated the Long-Term Care Ombudsman Program develop a pilot project to provide community ombudsman assistance to individuals in Hartford County. It is the responsibility of the State Ombudsman to also advocate for changes in laws and governmental policies and actions that pertain to the health, safety, welfare and rights of residents with respect to the adequacy of long-term care facilities. I appreciate this opportunity to testify on behalf of the thousands of individuals throughout Connecticut who receive long-term services and supports.

S.B. No. 1003 (RAISED) AN ACT CONCERNING NURSING HOME CARE.

The objective of this proposal is to study whether long-term services and supports across the continuum of care are sufficient to meet future demands in terms of programs, planning and services. This would provide demographic information about the adequacy of numbers of nursing homes and whether these homes will be positioned to provide services to meet the long-term care needs of our aging population. Previous studies, such as the Mercer, 2012 report, "State of Connecticut Medicaid Long-Term Care Demand-Projections", the Long-Term Services and Supports Plan (2010 and 2013) and the Long-Term Care Needs Assessment and others should serve as an excellent foundation for an updated study, if it is determined that a further study is required.

Long-term services and supports (LTSS) throughout the country as well as here in Connecticut are going through significant changes. The emphasis on supported community living and transitioning residents from nursing homes to the community means that there are substantial changes in the environments where people receive long-term supports and services. It is important to identify the specific needs at each point and the capacity of the various care settings. As more people receive LTSS in their home and community settings care providers and the state must understand the needs of those residents who continue to require care in the

Needs Allowance. When residents already made a significant sacrifice after the initial reduction, it is especially difficult for them to now absorb a further reduction as has been proposed in the Governor's budget implementer which would reduce the monthly personal fund allowance or "PNA" for nursing home residents from sixty to fifty dollars. This is an issue of such great importance to the well-being of the approximately 17,000 nursing home residents in the state. We especially appreciate the Aging Committee's attention to the Personal Needs Allowance and support of the residents through an increase and restoration of the COLA.

H.B. No. 6895 (RAISED) AN ACT REQUIRING THE STATE OMBUDSMAN TO INVESTIGATE COMPLAINTS CONCERNING RECIPIENTS OF HOME AND COMMUNITY-BASED CARE.

The need for advocacy for home and community based care recipients has been an ongoing conversation for State Ombudsmen across the country for more than a decade. The Connecticut Long-Term Care Ombudsman Program currently provides advocacy for individuals who reside in their communities and receive long-term services and supports as part of a pilot project mandated by the General Assembly two years ago. The pilot area is contained to Hartford County. During the brief time we have done community Ombudsman work there have been significant issues brought to our attention, including ensuring transportation to a day program and assisting families who have had significant concerns about their loved one's care.

In 2008, the Administration on Aging supported research specific to the evolving Ombudsman role. Compiled by the National Ombudsman Resource Center and the National Association of State Units on Aging the research looked at the strategic role for the Long-Term Care Ombudsman in other than the traditional institutional settings. Currently there are fifteen states across the country that provide community Ombudsman advocacy services. They do so utilizing a variety of funding sources, including state funds, nursing home bed taxes, Money Follows the Person dollars, state's tobacco tax or state lottery earnings. There are differences in how they operate, but all of these states have expanded their advocacy work to include individuals who reside in the community. The Ombudsman Program final rule was "put on display" in February, 2015 and I quote,

"AoA (the Administration on Aging) has no objection to those States which choose to utilize resources other than those appropriated through the OAA (Older American's Act) to expand ombudsman service to individuals living in a variety of settings or receiving a variety of long-term services and supports. However, absent Congressional authorization for the Ombudsman program to expand its services to new settings. AoA does not believe that it has the authority to provide for such an expansion of service through this rule."

of those residents who continue to require care in the nursing home setting. These individuals will quite likely have more medically complex needs and will require higher and more acute levels of care. Knowing how this changing acuity will impact future models of Connecticut nursing homes is essential.

S.B. No. 1005 (RAISED) AN ACT PROTECTING ELDERLY PERSONS FROM EXPLOITATION.

The purpose of this legislation is to strengthen protections of vulnerable elders against exploitation. The Long-Term Care Ombudsman Program supports this proposal, but with a specific recommendation: Section 4 (a) of the proposal defines mandated reporters to include "(8) professional patients' advocate". I ask the Aging Committee to add to the language "(excluding the Office of the State Ombudsman)". Per the Older American's Act, the Ombudsman Program is not a mandated reporter. The work of the Ombudsman is designed to be resident-centered and directed. And in fact, the Older American's Act at section 712(d) indicates that the Ombudsman (Office of the State Ombudsman) has sole authority to make such determinations of disclosures.

It is important that the State take a leadership role in effective protections for frail aging individuals, especially at a time when our aging demographics speak so dramatically to the numbers of people over the age of 65 who will reside in Connecticut. The Ombudsman Program appreciates the proponents thoughtful clarification of definitions included in this proposal as well as the professional intent of the proposal to provide improved protections for elders, with the exception of the request for clarification about mandated reporters/"professional patients' advocate. There are professional entities, care managers, social workers, aging professionals which have formed and provide advocacy services, these are the types of "professional patients' advocates" I believe are the intent of the proposed language.

H.B. No. 6893 (RAISED) AN ACT INCREASING THE PERSONAL NEEDS ALLOWANCE FOR RESIDENTS OF LONG-TERM CARE FACILITIES.

The Ombudsman Program and the residents of our long-term care facilities sincerely appreciate the Aging Committee's proposal to raise the Personal Needs Allowance from sixty dollars to sixty-five dollars and also restore the Social Security cost-of-living allowance. This modest increase will make a difference for residents. As you know, the 2011 budget resulted in a "temporary reduction" of the PNA and elimination of the cost of living allowance. The residents and this Office have come to the legislature the past few years to ask that the PNA and the COLA be restored. We have described for you the hardships this reduction causes the residents. Clothing, toiletries, occasional out-trips, hair care, telephone service, cable television services, all must come out of the monthly Personal

As a state we promote rebalancing through greater reliance on home and community based services. I look forward to further conversation and collective "brainstorming" to develop a Community Ombudsman service that both meets the needs of our citizens and is sustainable within the available resources of the Long-Term Care Ombudsman Program.

Respectfully,

Nancy Shaffer